L21000026330

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone	#)
PICK-UP WAIT	MAIL
(Business Entity Nam	ne)
(Document Number)	
Certified Copies Certificates	of Status
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	6/22/21
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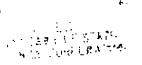
21 HAY 17 PH 3: 42

COVER LETTER

TO: Registration S Division of Co			
Harrison S SUBJECT:	Station, LLC		
SOBJECT:	Name of Lir	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	Barbara A. Lubin		
		Name of Person	
	Harrison Station, LLC		
		Firm/Company	
	1124 Jenks Ave		
		Address	
	Panama City, FL 32401		
	City/State and Zip Code		
	blubinmd@gmail.com		
For further information c	E-mail address: (concerning this matter, please c	to be used for future annual report no all:	tification)
Barbara A. Lubin		850 814-0785 _ at ()	
Name o	f Person		ne Telephone Number
Enclosed is a check for the	he following amount:		
■ S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S		Street Address:	ontion
Division of C		Registration So Division of Co	
P.O. Box 632	7	The Centre of	Tallahassee
Tallahassee, I	FL 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO , ARTICLES OF ORGANIZATION OF



HARRISON STATION, LLC

21 MAY 17 PH 3: 42

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 01/11/2021 ____ and assigned Florida document number <u>L21000026330</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 1124 Jenks Ave Enter new principal offices address, if applicable: Panama City, FL 32401 (Principal office address MUST BE A STREET ADDRESS) 1124 Jenks Ave Enter new mailing address, if applicable: Panama City, FL 32401 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: 1124 Jenks Ave New Registered Office Address: Enter Florida street address

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

Panama City

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Member

			7.112.157	
<u>Title</u>	<u>Name</u>	Address	21 HAY IT PH 3	: 42 _{Type of Action}
MGR ELMORE, TYSON		2834 TRANSMITT	ER ROAD	🗆 Add
		PANAMA CITY, F		Remove
				□Change
				🗆 Add
				□Remove
		-		DAdd
				□Remove
				Change
				□Add
		-		□Remove
		<u> </u>		□Change
				□Add
				□Remove
				□ Change
				🗆 Add
				Remove
				□Change

-	Change Address for Manager, Barbara A. Lubin to: 1124 Jenks Avenue, Panama City, FL 32401.
	Change Address for Manager, Michael McRorie to: 1124 Jenks Avenue, Panama City, FL 3240 21 MAY 17 PM 3
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	5/12/2021
etir etle	ve date, if other than the date of filing:
'	ctive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a pure of feeting date on the Congression of Section 1.
mc	ent's effective date on the Department of State's records.
ord file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
	J
d _	<u> 5/12</u> 2021
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Typed or printed name of signee